



City of Homer

www.cityofhomer-ak.gov

Port and Harbor

4311 Freight Dock Road
Homer, AK 99603

port@cityofhomer-ak.gov

(p) 907-235-3160

(f) 907-235-3152

VENDING MACHINE APPLICATION

IMPORTANT- READ ENTIRE APPLICATION BEFORE SIGNING

1. Compliance with Laws and Regulations:

Business shall be subject to and shall comply with all applicable laws and regulations that pertain to the operation of the Business and obtain all necessary permits or licenses required by a governmental authority. A copy of your business license will be required at the time of issuance of a license agreement for premises.

2. Insurance:

Business will obtain, at its expense, comprehensive general liability insurance with limitation of not less than \$1,000,000. Aggregate and will maintain such insurance during the entire term of any License Agreement. A copy of proof of this insurance will be required at the time of issuance of a license agreement for premises.

3. Nonfood items In Vending Machines:

Due to restrictions listed under Section 43.70.075 of State of Alaska Business Licensing Statutes, no vending machine shall be allowed to contain for sale or distribution any outlet cigarettes, cigars, tobacco, or other products containing tobacco at any location offered within this application.

4. Fees:

Square footage will be limited to a maximum of a 5 ft. x 5 ft. footprint for each machine. A flat rate fee of \$ 100.00 per month for each vending machine on the premise, regardless of actual square footage footprint under the maximum, will be required.

Utilities- All utilities required by the business are the sole responsibility of the business including installation and maintenance of all utility connections. An electrical usage flat rate fee of \$70.00 per vending machine/ per month is INCLUDED within the \$100.00 square footage fee listed above and will not require additional payment or billing on behalf of the applicant.



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PLEASE PRINT

BUSINESS INFORMATION			
Business Name:			
Business Address:			
City:	State:	Zip:	
Business Phone #:			
VENDING MACHINE BUSINESS OWNERSHIP INFORMATION (Responsible Party)			
Owner:			
Owner Address:			
City:	State:	Zip:	
Home Phone#	Work Phone#		
E-mail:			
MAILING/BILLING INFORMATION			
<input type="checkbox"/>	Same as Business Info	<input type="checkbox"/>	Same as Owner Info
Owner/Business Name:			
Billing Address:			
City:	State:	Zip:	

List Types of foods, beverages or non-food items to be sold or dispensed:

Describe the preferred location of Vending Machine (Including address if applicable):

How many vending machines are you proposing to place at this location? _____



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I hereby agree to at all times operate the said vending machine in conformance with the proposed intent and provisions stated above and any other requirements, ordinances or statutory laws of the State of Alaska relating to the conduct of such business.

I have read and understand all of the above requirements and agree to abide by them as condition of this application for license.

Applicant's Name: (please print) _____

Signature of Applicant: _____ Date: _____